

Who Cares?

South Carolina's children are South Carolina's future. But who is caring for them at home and at school? Who takes care of them when they are sick or while their parents are at work? Are they in the care of trained, responsible adults in a safe, healthy environment? Does anybody care? A concerned coalition of private, public, and not-for-profit child care providers and child advocates have joined with various community organizations, religious groups, businesses, agencies, parents, and interested individuals to improve the quality, availability, and accessibility of care for all of South Carolina's children. If we don't care, who will?

Recommendations for Improving Child Care in South Carolina

Recommendations from the Healthy Child Care South Carolina and the South Carolina Child Care Action Committees To Improve the Quality, Affordability, and Availability Of Child Care in Our State

Introduction

In a time when most parents must work hard to support their families, affordable quality child care takes on more importance for the whole community.

If we are to have healthy environments where children can thrive in school and life, it is essential to build and maintain close collaboration among parents, health care providers, and child caregivers. We must also include churches, businesses, community-based organizations, schools and government in our efforts to improve the quality, affordability and availability of early care and education programs in South Carolina.

Child care in South Carolina is an array of many different programs run by a variety of groups and individuals who receive funding from different federal, state, local and/or private sources, each with different requirements. The end result is widely varying levels of quality, availability, and affordability.

The good news is that a common vision for the future has begun to emerge. The concerted and committed efforts of state, county, and local government entities, the faith community, child care providers, the private "not-for-profit" and "for-profit" child care industry, child advocates, and the business community are "at the table" and some collaborative groups have formed. The Healthy Child Care Steering Committee and the SC Child Care Action Committee will remain the mechanisms for keeping key stakeholders informed of project goals, objectives, activities, and accomplishments.

Improvement in the availability, affordability, and quality of child care should be the cornerstone of South Carolina's efforts to improve children's readiness for success in school. Good health for young children depends on the economic and social health of their families and communities. It is the community's responsibility to create an environment where families can successfully meet the needs of their young children. Now is the time to address the health and educational needs of our children.



Goal I

Improve the Availability of Child Care

Increase the number of affordable quality child care slots for infants, toddlers, children with special health care needs; and in non-traditional hours and in under-served areas.

1. Promote recruitment and retention of child care programs through child care resource and referral organizations. Sponsor orientation sessions for concerned providers.
2. Expand training of child care teachers for infant/toddler care and children with special health care needs.
3. Pursue funding to increase the number of affordable quality child care slots for these children.
4. Provide funding to increase the capacity of child care resource and referral on a local level.

Availability

Why?

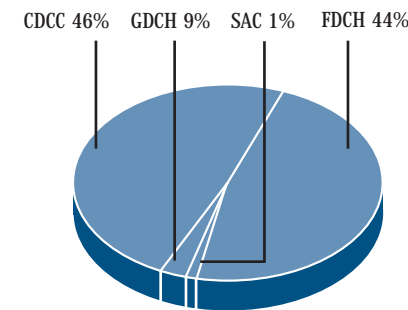
Availability of high quality child care (early care and education) is a serious problem in South Carolina. National estimates project that 60% of children under 5 years of age, from families of all income levels, are in need of child care. According to US Census data, approximately 253,048 children in South Carolina are under the age of 5. Based on these two estimations alone, 151,829 pre-school children in South Carolina are in need of child care. As of June 2000, there were 138,939 known child care slots in the state's 3,590 regulated facilities (source: DSS Child Day Care Licensing, 2000) with an estimated total of 140,364, including self-arranged care (with friends, neighbors, and/or relatives). It is estimated an additional 36,000 child care slots are still needed.

The distribution of child care spaces is not equitable across the state. In many communities, the available regulated spaces do not meet the need, and unregulated, or self-arranged care (with friends, neighbors, and/or relatives), is the norm. Only 12 of the state's 46 counties have sufficient or more than enough licensed or registered spaces available to care for just

the children less than 5 years of age.

Although friends and relatives may sometimes provide care, parents in desperate need of on-going child care are likely to resort to inappropriate unregulated child care arrangements. Parents of children with special health care needs, infants and toddlers, or more than one child often find themselves hard-pressed to meet their children's needs for competent adult supervision. Those parents who work the second or third shift, or live in rural areas, often face additional child care availability stresses.

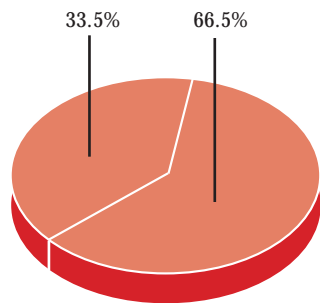
Often families simply do not know where child care is available, the characteristics of quality early care and education, or what to look for when selecting a child care provider. Child Care Resource & Referral (CCR&R) programs assist parents and child care providers by offering information and linking families with potential providers, thus helping parents find the kind of care they want, when they need it. More, or expanded capacity of existing CCR&Rs, are needed in the state.



TYPES OF FACILITIES State FY 1999

CDCC Child Day Care Center
GDCH Group Day Care Home
FDCH Family Day Care Home
SAC Self-Arranged Care

Source: DSS Office of Child Day Care Licensing and Regulatory Services, 2000



66.5% OF MOTHERS WITH CHILDREN UNDER 6 ARE IN THE LABOR FORCE

Source: 1990 Census Data



Through linked state databases (1996-1998), South Carolina has identified 80,717 children birth through 4 years and 98,110 children 5 through 12 years of age as Children with Special Health Care Needs (CSHCN).

Availability

Where are We Now?

Recently, the SC Department of Health & Human Services (DHHS) made available approximately \$1.7 million Child Care and Development Block grant funds available to support 183 child care providers in 39 counties. Three types of grants were made available in 1999 to enhanced or accredited child care centers enrolled in the ABC Child Care Program:

1. Implementation grants of up to \$25,000 were awarded to start quality infant and toddler services.
2. Expansion grants of up to \$12,000 were awarded to increase the number of infants and toddlers currently being served.
3. Quality grants of up to \$5,000 were awarded to improve the quality of infant and toddler services.

These grants were awarded for two purposes:

- (1) to solicit interest and determine basic qualifications of current providers interested in implementing, expanding, and raising the quality of infant and toddler programs throughout the state; and
- (2) to encourage those providers currently operating at the lowest level of care (meeting only minimum state licensing requirements) to raise their level of care to the enhanced or accredited status and to maintain standards higher than current state licensing standards.

In October 1999, state funding became available through the SC Dept. of Health & Human Services (DHHS) for the three Child Care Resource and Referral programs in South Carolina. The funding was used to help parents locate quality child care and to provide technical assistance for recruitment of new providers and retention of existing providers.

Goal II

Improve the Affordability of Child Care

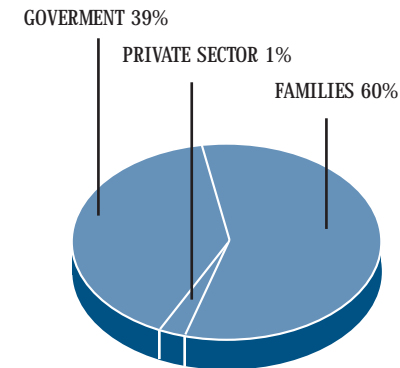
No family should pay more than 10% of their gross family income for quality child care.

1. Review successful initiatives implemented by other states to improve affordability of quality child care.
2. Educate policy makers, parents, and public about the cost of quality child care.
3. Develop a workable plan for South Carolina to make quality child care affordable.
4. Secure funding to allow all parents, especially those with lower incomes, to afford quality child care programs.
5. Promote increase in Child Care and Development Block Grant dollars designated for low-income working parents.
6. Use TANF dollars to provide child care for Family Independence clients and low income working parents.
7. Promote employer use of child care subsidies, dependent care accounts, and advantages of employer tax credits.
8. Identify and pursue all other available sources of funding, ensuring that all of South Carolina's Children enter first grade ready to learn.
9. Develop mechanisms to assure that families do not pay more than 10% of their gross family income for quality child care.
10. Consider ceiling levels for state subsidy for low income families (such as 185% of poverty or 75% of the state median income).

Affordability

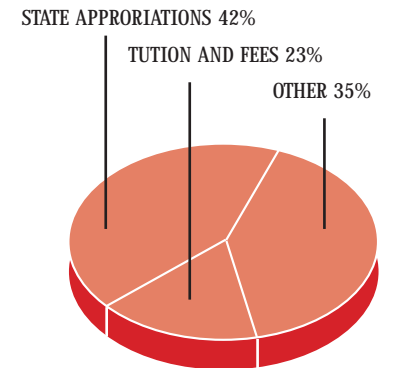
Why? For many parents, finding affordable quality child care is a difficult task. Even with the availability of existing subsidy programs, other funding sources are needed to make high quality early care and education programs available at a reasonable cost for all families. In 1999, the annual tuition to attend the University of South Carolina was \$3,600; whereas, the annual cost for parents whose child attended the university's child care center was \$5,100 for a 12 month old and \$3,900 for a four year old.

Sharp contrasts are found when major revenue sources for early care and education are compared to the sources for higher education. According to a national study (Mitchell, 1997) families pay for only 23% of the cost of higher education for their children, while they pay for 60% of the cost of early care and education for their children.



MAJOR REVENUE SOURCES FOR CHILD CARE AND EARLY EDUCATION

Source: "FINANCING CHILD CARE IN THE UNITED STATES" 1999



RECOURCES FOR HIGHER EDUCATION

Comparison of Wages in South Carolina

Occupation	# Employed	Median Hourly	Mean Hourly	Mean Annual
Child Care Workers	8,240	\$6.01	\$6.30	\$13,000
Teacher Aids, and Educational Assistants, Clerical	4,340	\$6.67	\$6.90	\$14,340
Teachers, Preschool	2,200	\$7.71	\$8.78	\$18,260
Teachers, Kindergarten	2,450	*	*	\$29,920
Teachers, Elementary	24,550	*	*	\$33,970
Recreation Workers	3,110	\$7.03	\$8.06	\$16,760
Home Health Aids	2,670	\$7.16	\$7.35	\$15,290
Receptionists and Information Clerks	13,760	\$8.25	\$8.50	\$17,680
Wardrobe, and Locker and Dressing Room Attendants	40	\$7.71	\$8.26	\$17,180
Maids and Housekeeping Cleaners	16,070	\$6.31	\$6.66	\$13,860

* Hourly wage rates for occupations where workers typically work fewer than 2,080 hours per year are not available.

Annual wages have been calculated by multiplying the hourly mean wage by a "year-round, full-time" hours figure of 2,080 hours, for those occupations where there is not an hourly mean wage published, the annual wage has been directly calculated from the reported survey data.

1998 State Occupational Employment and Wage Estimates - South Carolina

The cost estimates on the chart at right are based on observing national child care standards for low child/staff ratios, small group (class) sizes, adequate staff wages (including health benefits), and other realistic program costs for a child care center program serving 150 children.

When child care center programs implement these high quality standards, costs double. Obviously, parents cannot bear the brunt of these added quality improvements. This burden must be shared with state and local governments, school districts, businesses, faith communities, and others who are concerned about the development and success of our children.

Estimated Per Child Cost of High Quality Early Care and Education in a Center-based Program

Age	Adult:Child Ratio	Cost/child week	Cost/child yr
Infant care	1/3	\$173.08	\$9,000
Two Year Olds	1/5	\$153.85	\$8,000
Three Year Olds	1/7	\$134.62	\$7,000
Four Year Olds	1/8	\$125.00	\$6,500
Five Year Olds	1/9	\$125.00	\$6,500
School-age	1/10	\$ 76.92	\$4,000

Source: An ad hoc committee of child care experts from the Healthy Child Care South Carolina Steering Committee. According to some national studies, these costs may even be on the low side.

Affordability

Where are We Now?

Families may be eligible to receive financial assistance for child care through the ABC Child Care Program if they: receive benefits from the South Carolina Family Independence Program (FI), receive a referral from Child Protective Services, provide care for a foster child, have a child with special health care needs, participate in a Head Start program, or have a gross income that is at or below 150% of poverty, based on their family size. In addition to meeting income guidelines, adults must be working, attending school or in training, or be disabled. Parents who are eligible because of income may continue to receive assistance until their gross family income exceeds 175% of the federal poverty guidelines.

A national study, conducted by the Urban Institute, includes South Carolina as one of the 9 states in which fewer than 10% of children potentially eligible were served in fiscal year 1998 under limits, set by the state for federal Child Care Development Funds (CCDF). Actual data shows that only 21,733 of 115,200 (5.3%) of children eligible at 125% of the federal poverty guidelines in place in 1998, received CCDF subsidized child care services in South Carolina that year.

Quality

Goal III

Why? Research shows that quality child care helps young children become emotionally secure, socially competent and intellectually capable. Early care and education is important for children's success in school and in life. Children from disadvantaged families who were enrolled in quality child care or early-intervention programs demonstrate long-term benefits, including better school achievement, higher lifetime earnings, decreased placement in special education programs, and less involvement with the criminal justice system.

Experts in the field have identified three vital elements for quality child care: staffing (the number of children cared for by one adult based on age and developmental needs), group size, and education level of the teacher. These experts consider quality child care programs as those in which:

1. The environment is safe and comfortable;
2. Children receive care in small groups;
3. Each adult worker is responsible for only a few children;
4. Teachers are well prepared and adequately paid; and
5. The program encourages parent involvement and is linked to comprehensive health and nutrition services.

In order to improve the quality of child care in South Carolina, an incremental decrease in the number of children cared for by one adult needs to occur over the next five years.

Improve the Quality of Child Care

Through Legislation and Regulation.

1. Adequately fund the child care licensing agency to monitor child care facilities in accordance with existing regulations; including unannounced inspections of licensed child care facilities. Institute unannounced inspections for at least 30% of registered child care facilities annually.
2. Require registered church facilities to meet the same floor space, child/staff ratios, and training requirements now expected from licensed centers.
3. Require fire and sanitation standards for centers operating in shopping centers, health clubs, and similar situations.
4. Require fingerprinting and background checks for all staff at summer day and resident camps serving children for more than 4 hours per day.
5. Streamline the fingerprint and background check process.
6. Lower child-staff ratios and group sizes in all licensed child care facilities. The table at right shows current and proposed adult/child ratios. Currently, South Carolina regulations do not mention group sizes for child care facilities.
7. Require potential child care providers to complete pre-service training (basic skills/orientation), including basic information on brain development.
8. Require registered family child care providers to accumulate 10 hours of training per year in areas of child development, curriculum, professional development, health, safety, and nutrition. This is in addition to CPR and first aid.
9. Prohibit corporal punishment in all child care facilities.
10. Include exemption provision in statewide zoning laws pertaining to family child care homes caring for six or fewer children.
11. Require and enforce requirements for child safety seats or age appropriate child passenger restraint devices for all children who are transported by child care programs.
12. Change the legal language from "day care" to "child care."

Children's later success in school often depends on the quality of the child care they received in early childhood. The *Cost, Quality and Child Outcomes Study* (Frank Porter Graham, 1999) revealed five long-term effects of quality child care.

Finding One: Children who attended child care with higher quality classroom practices had better language and math skills from the preschool years into elementary school.

Finding Two: Children with closer teacher-child relationships in child care had better classroom social and thinking skills, language ability, and math skills from the preschool years into elementary school.

Finding Three: Better child care quality was more strongly related to better math skills and fewer problem behaviors from the preschool years through second grade particularly for children whose mothers had less education.

Finding Four: Children who attended higher quality child care had better thinking and social skills in the second grade, even after considering kindergarten and second-grade classroom experiences.

Finding Five: Children who experienced more positive classroom climates in child care had better relationships with peers in second grade.

In South Carolina, regulations for registered family child care homes are minimal. Providers, however, may volunteer to meet higher standards through participation in the state's ABC Child Care Program or the US Department of Agriculture's Child and Adult Care Food Program. Other than state and federal background checks on providers, current regulations do little to protect children in registered family child care since there are no minimal health and safety standards or training requirements.

Child care centers and licensed homes (mostly group homes caring for up to 12 children) are inspected for compliance with health and safety regulations, which are monitored through the SC DSS Office of Child Day Care Licensing and Regulatory Services. DSS has contracts with the Department of Health and Environmental Control (DHEC) and local fire marshals to assist with this inspection process. Child care programs may also receive monitoring visits from the ABC Child Care Program and the Child and Adult Care Food Program, if they participate in either program. Currently, there is no efficient approach to coordinate inspections or to otherwise combine these efforts.



Recommendations for Adult: Child Ratios in SC Child Care Center Programs

Ages	Current DSS Ratios	By 2001 (Current ABC)	Group Size ABC	By 2005 (Current NAEYC) *	Group Size NAEYC*
0-1 Year	1:6	1:5	10	1:4	8
1 Year	1:6	1:5	10	1:5	10
2 Years	1:10	1:7	14	1:7	14
3 Years	1:13	1:11	22	1:9	18
4 Years	1:18	1:13	26	1:12	24
5 Years	1:21	1:15	30	1:15	30
6+ Years	1:23	1:18	36	1:18	36

* National Association for the Education of Young Children

Goal III continued

Improve the Quality of Child Care

Through Existing Programs and Agencies

1. Increase the number of child care providers meeting standards that exceed state regulatory requirements.
2. Coordinate federal and state agency funding, services, and resources to improve access to and enhance services offered at the local level.

Through Training and Education

1. Promote the development of appropriate training and funding for all levels of child care personnel.
2. Promote articulation transfer agreements between secondary education, technical colleges, and universities.

Through Public Awareness

1. Establish a public awareness campaign to educate parents, child care providers, business community, faith community, healthcare providers, education community, and public officials on the characteristics of quality child care.
2. Establish a public education campaign highlighting the value of quality child care to the child, the family, the community, and the state of South Carolina's economic future.

Where are We Now?

Through Legislation and Regulation

Adequate funding: At the direction of the Governor, three state agencies involved in regulating child care formed an exploratory committee to look at the proper placement and adequate funding of child care in the state's governmental structure. In order to adequately monitor child care facilities, the committee members agreed that proper funding, not agency location, should be the primary decision factor. Once funding was identified to properly monitor basic health and safety standards, the decision was made that the Department of Social Services would continue to house the state's child care licensing division.

Church-based Child Care: Senate bill 199 was passed by the 2000 Legislature and signed into law by Governor Hodges on February 25, 2000. This new law requires all registered church-based child care center programs to comply with the same floor space, child-staff ratios, and training requirements as required of all licensed child care center programs.

Fingerprinting: In 1996, the South Carolina General Assembly passed legislation requiring state and federal criminal background checks on all child care center staff and family child care home providers. Effective July 1, 1999, the fees for State Law Enforcement Division (SLED) background checks were reduced for not-for-profit (501 c 3) organizations and churches from \$24 to \$8 per individual. In addition, SC DSS and SLED have implemented a system that allows providers to request SLED background checks of potential employees "on-line" through the Internet,



in person, or through the mail. This will dramatically improve the turn-around time for these state background checks.

ABC Child Care Program: As of August 2000, the following number of programs in South Carolina were listed as "Enhanced" through the SC Department of Health & Human Services. Enhanced programs voluntarily meet standards above DSS licensing standards.

- 821 Enhanced child care centers
- 224 Enhanced family child care homes
- 132 Enhanced group child care homes
- 54 Enhanced National Association for the Education of Young Children (NAEYC) accredited centers.
- 0 Enhanced National Association of Family Child Care Accredited Homes

Child Safety Seats: On June 6, 2000 South Carolina passed a law requiring that any entity transporting children, use vehicles that meet certain school bus safety standards. The state also requires child care facilities to use school busses to transport children instead of vans.

Coordination of Services: On June 28, 1999, Governor Hodges signed into law the “South Carolina First Steps to School Readiness Act.” One provision in the law focuses on child care quality, affordability and availability. \$20 million dollars were appropriated by the General Assembly for the Year 2000. The legislature adopted a state budget that included a \$10 million increase in funding for First Steps bringing the total allocation in state funds for fiscal year 2000-2001 to \$30 million.

Public Awareness: Child Care Resource & Referral, with funding from SC DHHS, printed 50,000 copies of “A Parent’s Guide to Choosing Quality Child Care in South Carolina.” Copies have been distributed to parents, First Steps County Boards, DSS Family Independence participants, Licensing offices, Head Start, Success By 6 programs, businesses, real estate companies, churches, and parent education groups.

Stand for Children: 1999 and 2000 Stand for Children Day Events were collaborations between over 60 public and private organizations/agencies/businesses/churches, etc. to provide public awareness activities. In 1999, 1,500 attended the event at the State House and SC State Museum and in 2000, over 1,200 attended the event at the SC State Museum. Both events received local and national coverage.

Raising Standards: Success By 6, United Way of the Midlands, through a grant from Bank of America, is providing resources to assist child care center programs and family child care providers with moving to the next level of care. Funding will be used for mentoring and materials necessary to move programs from a level 1 (registered/licensed) status to level 2 (ABC Enhanced) or level 3 (nationally accredited through the National Association for the Education of Young Children or the National Family Child Care Association). Several other Success By 6 sites have also implemented child care provider training and support systems.

The SC Department of Social Services made funds available to local Success By 6 initiatives in fiscal year 1999-2000, to assist with initiatives across the state.

Private/Faith Community Partnerships: “The Children Among Us,” a brochure which began in a Healthy Child Care SC sub-committee, was developed to encourage faith communities to establish child care as a mission to their neighborhoods. This brochure has now developed into a child care “start-up” manual for faith-based organizations.

Through Training and Education: South Carolina is considered a leader in the field of continued education and training for child care teachers and is:

- One of only eight states that has a State Child Care Credential
- One of ten states whose licensing regulations include training requirements
- One of twenty-three states to have defined core competencies for teachers working in child care

In 1999, a statewide incentive program called “Smart Money” was implemented through the center for Child Care Career Development. The program awards cash bonuses of \$200 or \$100 to early childhood teachers who have earned the State Child Care Credential. Since February 1995, 762 child care teachers have earned this credential.

The state has also developed a training program through all 16 of its technical colleges to provide child care teachers with training that is on par with national standards. South Carolina is in the process of developing director credentialing. Three technical colleges offer programs in this area of study.

Head Start: New requirements are raising the training credentials for teachers in Head Start programs. Head Start teachers will be required to have at least a two year Associates Degree in Early Childhood or child development. There are 15 Head Start programs that are nationally accredited.



Healthy Child Care America

The Healthy Child Care America Campaign is the shared vision of the Child Care Bureau and the Maternal and Child Health Bureau.

The Child Care Bureau was established in January 1995. It is located within the Administration on Children, Youth and Families (ACYF), U.S. Department of Health and Human Services. ACFY's mission is to enhance the quality, affordability, and supply of child care for all families.

The Maternal and Child Care Health Bureau, located within the Health Resources and Services Administration (HRSA), U.S. Department of Health and Human Services, has existed for over 80 years. The National Child Care Health Forum, held in 1995, introduced the Healthy Child Care America Campaign.

The ambition of the Healthy Child Care America Campaign is two-fold: (1) Create and maximize linkages between health care providers and the child care community; and (2) develop comprehensive and coordinated services to benefit children across the country.

Healthy Child Care South Carolina

In October 1996, the South Carolina Department of Health and Environmental Control (DHEC) received a federal grant to assess the state of child care. DHEC's assessment led the agency to develop plans to: (1) integrate health and other support services into child care; (2) improve the quality of child care; and (3) increase the supply of quality child care in the state. The recommendations in this booklet are the results of those efforts.

The South Carolina Child Care Action Committee

To sustain the energy of their work, the Healthy Child Care South Carolina Steering Committee resolved to continue as a private/public partnership regardless of funding sources, using these recommendations to inspire change in legislation, regulation, policy, and program development.

Healthy Child Care South Carolina Steering Committee

Joyce B. Brown, Chair – SC DHEC (803) 898-0753
Walter Waddell, Executive Director – The Alliance for SC's Children (803) 256-4670
Harriett Atkinson – Children's Garden (803) 779-6465
Ada Belk – SC DSS – Office of Child Day Care Licensing & Regulation (803) 898-7543
Michele Bowers/Leigh Bolick – SC DSS – Office of Family Independence (803) 898-9375
Wayne Bryan – SC Christian Action Council
Nancy Burchins – Palmetto Richland CDC (803) 434-7248
Kitty Casoli – SC DHHS – (803) 898-2570
Lisa Corning – USC Children's Center (803) 777-7887
Penny Danielson – SCETV (803) 737-3321
Mary Lynn Diggs – SC Head Start Collaboration Office (803) 898-2861
Dennis Drew – SC Child Care Association (864) 223-39445
Joanne Emerson – Interfaith Community Services of South Carolina, Inc. (803) 252-8390
Heather Feltman – SC Christian Action Council (803) 786-7115
Leroy Frazier – SC DHEC (803) 898-0314
Sandra Hackley – Child Care Resource & Referral, Interfaith Community Services of SC, Inc. (803) 252-8390
Ian Hamilton – The Alliance for SC's Children (803) 256-4670
Kathy Hart – BabyNet (803) 898-0591
Catherine Haselden – Governor's Office (803) 734-0397
Kathleen Hayes – SC Families for Kids (803) 252-9101
Katherine Hepfer – SC Dept. Mental Health (803) 898-8519
Baron Holmes – SC Kids Count – State Budget & Control Board (803) 734-2291
Beverly Hunter – SC DHHS – Program Monitoring (864) 250-8297
Beebe James – Prevent Child Abuse South Carolina (803) 733-5430
Krista Kustra – State Director, Center for Child Care Career Development (864) 250-8582
Helen Lebbey – SC DSS – Office of Child Day Care Licensing & Regulatory Services (803) 898-7345
Janet Marsh – Institute on Family & Neighborhood Life, Clemson University (864) 656-0229
Sally McClellan – South Carolina Association for the Education of Young Children (803) 641-3352
Amy Merck – Family Information Network – Clemson University (864) 931-0445
Sally Mullen – SC Early Childhood Association (803) 788-0859
Sarah O'Brien – CRS Parent Liaison – SC DHEC (803) 898-0348
Mark Orf – SC DHHS (803) 898-2570
Rita Paul – Office of First Steps (803) 734-0100
Francis Rushton – SC Chapter American Academy of Pediatrics (843) 524-5437
Joy Sovde – Success By 6, United Way of the Midlands (803) 733-5418
Judith Thompson – SC Nurses Association (803) 252-4781
Dorothy Tunstall – St. Paul's CDC (803) 356-2170
Frank White – SC Department of Education (803) 734-8458
Agnes Williams – Greenville's Child, Inc. (864) 467-4800
Reece Yandle – SC Association of Christian Schools & Child Care Network (843) 851-6921

Funding for this document provided by:

